

General

Title

Home health care patients' experiences: percentage of home health care patients who reported that their home health team discussed medicines, pain, and home safety with them.

Source(s)

Centers for Medicare & Medicaid Services (CMS). Home health care CAHPS® survey protocols and guidelines manual. Version 9.0. Baltimore (MD): Centers for Medicare & Medicaid Services (CMS); 2017 Jan. 550 p.

Centers for Medicare & Medicaid Services (CMS). Home health care CAHPS® survey. Baltimore (MD): Centers for Medicare & Medicaid Services (CMS); 2013. 6 p.

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Patient Experience

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of adult home health care patients who reported that their home health care team discussed specific care issues related to medicines, pain, and home safety with them.

The "Specific Care Issues" composite measure is based on seven questions in the Home Health Care CAHPS Survey that ask patients whether ("Yes" or "No"):

When you first started getting home health care from this agency, did someone from the agency talk with you about how to set up your home so you can move around safely?

When you started getting home health care from this agency, did someone from the agency talk with you about all the prescription medicines you were taking?

When you started getting home health care from this agency, did someone from the agency ask to see all the prescription medicines you were taking?

In the last 2 months of care, did you and a home health provider from this agency talk about pain?

In the last 2 months of care, did home health providers from this agency talk with you about the purpose for taking your new or changed prescription medicines?

In the last 2 months of care, did home health providers from this agency talk with you about when to take these medicines?

In the last 2 months of care, did home health providers from this agency talk with you about the important side effects of these medicines?

Note: A composite score is calculated in which a higher score indicates better quality. The scoring on this composite will represent the proportion of respondents who responded "Yes" to these questions. Composite scores are intended for consumer-level reporting.

Rationale

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Home Health Care Survey (HHCAHPS) is designed to measure the experiences of people receiving home health care from Medicare-certified home health care agencies.

The survey is designed to meet the following three broad goals:

To produce comparable data on the patient's perspective that allows objective and meaningful comparisons between home health agencies on domains that are important to consumers.

Public reporting of survey results will create incentives for agencies to improve their quality of care.

Public reporting will enhance public accountability in health care by increasing the transparency of the quality of care provided in return for public investment.

Evidence for Rationale

About Home Health Care CAHPS Survey. [internet]. Baltimore (MD): Centers for Medicare & Medicaid Services (CMS); [accessed 2017 Sep 27].

Primary Health Components

Home health care; patient experience; care issues; pain; medication; home safety

Denominator Description

The number of respondents who answered the questions included in the "Specific Care Issues" measure on the Home Health Care CAHPS Survey (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

The number of respondents who answered "Yes" to the questions included in the "Specific Care Issues" measure (see the related "Numerator Inclusions/Exclusions" field)

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and

organizational sciences

Focus groups

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

On September 25, 2006, the Agency for Healthcare Research and Quality (AHRQ) published a call in the Federal Register for survey items or measures representing areas of quality home health care that are viewed as important to consumers, their families, and intermediaries and initiated a review of existing literature in the area. AHRQ developed a draft survey instrument after several rounds of cognitive testing. A field test was conducted in 2008 with 34 home health agencies to test the psychometric properties of the survey and finalize its content. A final Home Health Care CAHPS Survey was developed in the summer of 2008.

Evidence for Extent of Measure Testing

About Home Health Care CAHPS Survey. [internet]. Baltimore (MD): Centers for Medicare & Medicaid Services (CMS); [accessed 2017 Sep 27].

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Home Care

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Specified

Target Population Age

Age greater than or equal to 18 years

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Person- and Family-centered Care

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Getting Better

Living with Illness

IOM Domain

Patient-centeredness

Data Collection for the Measure

Case Finding Period

The sample month

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Encounter

Patient/Individual (Consumer) Characteristic

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

The number of respondents who answered the questions included in the "Specific Care Issues" measure on the Home Health Care CAHPS Survey

Patient eligibility requirements:

- Patients who are at least 18 years of age by the end of the sample month;

- Patients whose home care was paid for by Medicare or Medicaid. This includes patients who are enrolled in Medicare fee-for-service plans and those enrolled in Medicare Advantage (MA) plans or Medicaid managed care health plans.

- Patients who had at least one home health visit for skilled nursing care, physical therapy, occupational therapy, or speech therapy during the sample month*;

- Patients who had at least two home health visits for skilled nursing care, physical therapy, occupational therapy, or speech therapy during the lookback period (includes the sample month and the preceding month)**;

- Patients who are not deceased;

- Patients who are not currently receiving hospice care; and

- Patients who received home visits for services other than routine maternity care in the sample month.

*For a visit to be considered a "skilled visit" the agency employee must be classified as one of the following: registered nurse (RN), licensed practical nurse (LPN), physical therapist, physical therapist assistant, occupational therapist, occupational therapist assistant, speech therapist, or speech therapist assistant. Skilled visits do not include visits made by any category of social worker, home health or personal care aide, or nursing aide.

**The *lookback period* is defined as the sample month and the month immediately preceding the sample month.

Exclusions

- Patients who received home visits ONLY for routine maternity care in the sample month.

- Patients who have harmed or endangered the health or well-being of a home health provider or attempted to harm or endanger the health or well-being of a home health provider;

- State-regulated patients (some states have regulations and laws governing the release of patient information for patients with specific illnesses or conditions, and for other special patient populations, including patients with HIV/AIDS); and

- Patients who requested that the home health agency (HHA) not release their name and contact information to anyone other than agency personnel, referred to as "no publicity" patients.

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

The number of respondents who answered "Yes" to the questions included in the "Specific Care Issues" measure

Note: The results from the questions that comprise a composite are reported as one score. Composite scores are compiled by calculating the proportion of cases that responded to each answer choice in the questions that comprise the composite. Once the proportions of responses to all answer choices in the questions in the composite are calculated, the average proportion of those responding to each answer choice in all questions in the composite is calculated. Only questions that are answered by survey respondents are included in the calculation of composite scores. The numerator for each question in the composite is the number of respondents in the quarter who gave the most positive response to each question (that is, responded "Yes" to all of the questions). From the responses, a composite score is calculated in which a higher score indicates better quality.

Exclusions

Unspecified

Numerator Search Strategy

Fixed time period or point in time

Data Source

Patient/Individual survey

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Home Health Care CAHPS® Survey

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Composite/Scale

Mean/Median

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Description of Allowance for Patient or Population Factors

The patient mix adjustment factors being used in the Home Health Care CAHPS (HHCAHPS) Survey are derived from coefficients obtained from Ordinary Least Squares regression analyses on each separate HHCAHPS response item for the identified patient characteristics. The regression coefficients indicate the tendency of patients with particular characteristics to respond more positively or negatively to HHCAHPS Survey questions. Patient mix adjustment factors are calculated directly from these regression coefficients for each HHCAHPS response item by multiplying the coefficients by negative one (-1.0).

Patient mix adjustment factors to account for home health agency (HHA) differences in patient mix are calculated for the latest quarter and applied to HHA raw scores for each of the latest quarter's HHCAHPS response items. The latest quarter's composite measures are then formed from these adjusted scores. The last four quarters of adjusted scores are then averaged to produce the current quarter's published scores. Published scores are adjusted for differences between an HHA's patient composition according to the HHCAHPS patient mix characteristics and the overall national composition of home health patients on these same characteristics. This adjustment, which allows consumers to compare different HHAs based on the same overall patient composition, is made by subtracting the national mean for a given patient characteristic from an HHA's share of patients on this patient characteristic.

Refer to *Patient-Mix Adjustment Factors for Home Health Care CAHPS Survey Results Publicly Reported on Home Health Compare in October 2017* for additional information (see the "Companion Documents" field).

Standard of Comparison

not defined yet

Identifying Information

Original Title

Specific care issues.

Measure Collection Name

CAHPS Home Health Care Survey

Submitter

Centers for Medicare & Medicaid Services - Federal Government Agency [U.S.]

Developer

Agency for Healthcare Research and Quality - Federal Government Agency [U.S.]

CAHPS Consortium - Health Care Quality Collaboration

Centers for Medicare & Medicaid Services - Federal Government Agency [U.S.]

Funding Source(s)

Centers for Medicare & Medicaid Services (CMS)

Composition of the Group that Developed the Measure

CAHPS Consortium researchers and statisticians

Financial Disclosures/Other Potential Conflicts of Interest

None

Endorser

National Quality Forum - None

NQF Number

not defined yet

Date of Endorsement

2015 Jan 7

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2017 Jan

Measure Maintenance

Unspecified

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

This measure updates previous versions:

Centers for Medicare & Medicaid Services (CMS). Home health care CAHPS® survey protocols and guidelines manual [version 5.0]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2013 Jan. 559 p.

Centers for Medicare & Medicaid Services (CMS). Home Health Care CAHPS® Survey. Baltimore (MD): Centers for Medicare & Medicaid Services (CMS); 2009 Jul 18. 6 p.

Measure Availability

Sources available from the [Home Health Care CAHPS Survey Web site](#) .

For more information, contact RTI International at E-mail: hhcahps@rti.org; Phone: 1-866-354-0985.

Companion Documents

The following are available:

Patient-mix adjustment factors for Home Health Care CAHPS Survey results publicly reported on Home Health Compare in October 2017. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2017 Oct. 5 p. Available from the [Home Health Care CAHPS Survey Web site](#) .

Steps for calculating global ratings and composite scores for the Home Health Care CAHPS Survey. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2016 May. 9 p. Available from the [Home Health Care CAHPS Survey Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on February 10, 2010. The information was verified by the measure developer on May 3, 2010.

This NQMC summary was retrofitted into the new template on May 2, 2011.

This NQMC summary was updated by ECRI Institute on July 17, 2013. The information was verified by the measure developer on August 1, 2013.

This NQMC summary was updated again by ECRI Institute on January 3, 2018. The information was verified by the measure developer on January 30, 2018.

Copyright Statement

No copyright restrictions apply.

Production

Source(s)

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